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			[(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/800,688	03/16/2004	•	Keiichi Fukuda		H1658.0010/P010 2087			
TITLE OF INVENTION: CONTENTS DATA TRANSMISSION/RECEPTION SYSTEM, CONTENTS DATA TRANSMITTER, CONTENTS DATA RECEIVER AND CONTENTS DATA TRANSMISSION/RECEPTION METHOD								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	Ė FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440	\$300	\$0		\$1740	07/08/2008	
EXAMINER		ART UNIT	CLASS-SUBCLASS					
BAYOU, Y	YONAS A	2134	380-277000					
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).				e patent front page, li to 3 registered pater		, l Dicks	tein Shapiro	
Change of corresponded	ondence address (or Cha 3/122) attached	or agents OR, altern	atively,	·	\checkmark	LLP		
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney	f a single firm (having as a member a ney or agent) and the names of up to tent attorneys or agents. If no name is will be printed.				
3. ASSIGNEE NAME A			•			/	· ··-	
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
D&M Holdings Inc. Kawasaki-shi, Kanagawa, Japan								
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🔀 Corporation or other private group entity 🗀 Government								
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)								
				check is enclosed.				
Publication Fee (N Advance Order - #	it card. Form PTO-2038 is attached. ereby authorized to charge the required for (s), any deficiency, or credit any Deposit Account Number (24-110-13) (enclose an extra copy of this form).							
			overpayment, to D	posit Account Numb	er 04-	10/3 (enclose at	n extra copy of this form).	
5. Change in Entity Stat	tus (from status indicate s SMALL ENTITY state		☐ b. Applicant is no	onger claiming SMA	LL ENTI	IY status. See 37 Cl	FR 1.27(g)(2).	
NOTE: The Issue Fee and	d Publication Fee (if req		d from anyone other tha	- -			e assignee or other party in	
Authorized Signature Date July 3, 2008								
Typed or printed name	M =1- T		Registration No. 33,082					
an application. Confident submitting the completed this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	iality is governed by 35 lapplication form to the ons for reducing this buirginia 22313-1450. DC 13-1450.	U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to th	1.14. This collection is depending upon the in e Chief Information Of COMPLETED FORMS	estimated to take 12 dividual case. Any or icer, U.S. Patent and TO THIS ADDRES;	minutes to omments of Trademants. SEND	o complete, including the amount of tires of the control of the co	I by the USPTO to process) g gathering, preparing, and ne you require to complete utment of Commerce, P.O. for Patents, P.O. Box 1450, number.	